



Health Services
LOS ANGELES COUNTY

**Los Angeles County
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October 6, 2009

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

Dear Supervisors:

**APPROVAL AND DESIGNATION OF STROKE CENTERS
ALL DISTRICTS
(3 VOTES)**

SUBJECT

Request authorization to approve and designate Stroke Centers to provide optimal care for 9-1-1 stroke patients in Los Angeles County.

IT IS RECOMMENDED THAT YOUR BOARD:

Authorize and instruct the Interim Director of Health Services, or his designee, to approve and designate qualified private and public hospitals as Approved Stroke Centers (ASC) to provide optimal care for 9-1-1 stroke patients in Los Angeles County.

PURPOSE/JUSTIFICATION OF THE RECOMMENDED ACTION

Approval of the recommended action will allow the Department of Health Services (DHS) Emergency Medical Services (EMS) Agency to identify and approve qualified private and public hospitals as ASCs, as well as provide the EMS Agency a control point to verify, on an annual basis, that ASCs maintain their acute stroke teams. Coupled with a related patient destination policy, recently approved by the EMS Commission, this action will enable the transport of 9-1-1 stroke patients to an ASC for earlier definitive diagnosis and treatment to improve patient outcomes, rather than to the nearest hospital.

In 2007, the American Stroke Association (ASA) issued a policy statement which included the EMS role. It recommended that patients should be transported to the nearest stroke center for evaluation and care. Studies have shown that morbidity and mortality due to stroke can be reduced significantly if patients activate the EMS system early,

thereby shortening the time to treatment. Paramedics currently transport all stroke patients to the nearest hospital. If the receiving hospital does not have the stroke center capability, some patients may require secondary transfer to a Stroke Center.

With the implementation of a Stroke Center program for 9-1-1 patients, Los Angeles County will join eight other Local EMS Agencies (LEMSAs) within California with a 9-1-1 stroke designation program. Several other LEMSAs within the State are currently working towards the development of a 9-1-1 stroke designation program.

Implementation of Strategic Plan Goals

The recommended actions support Goal 2, Children, Family, and Adult Well-Being, and Goal 4, Health and Mental Health of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

There is no fiscal impact to the County and no financing will be necessary, based on the current number of hospitals within Los Angeles County that qualify as an ASC. The establishment and monitoring of the ASC program will be incorporated into the EMS Agency's current Hospital Programs Section, which currently performs annual site reviews for other programs.

DHS will monitor the costs associated with the oversight of the ASC program and may seek to implement fees in the future, should the workload increase significantly, requiring additional staff.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Stroke is the third leading cause of death in the United States and a leading cause of serious, long-term disability in adults. Research has found that the sooner a patient can be identified as having a stroke, the sooner intervention can be delivered in an effort to reduce the death of brain tissue and disability and to save lives.

There is national interest in developing a systematic approach to stroke care supported by organizations such as the ASA, the American College of Emergency Physicians and the Joint Commission. In many states stroke systems have been created either through legislation or an edict from a State Health Commissioner. In California, a Stroke Work Group was convened in 2007 to develop strategies for the development of a statewide system of care for acute stroke.

The current standards to be used by the EMS Agency (Attachment A) are based on the Joint Commission for Primary Stroke Center Certification Standards. These are based upon the Brain Attack Coalition's Recommendations for Primary Stroke Centers and

guidelines developed by the American Heart Association/American Stroke Association or equivalent evidence based guidelines. These standards include the following, "...EMS stroke routing plans that address transferring stroke patients to stroke centers...". Hospitals meeting the Joint Commission standards for Primary Stroke Center designation must have an acute stroke team to include physicians and nurses with additional training in the care of a patient experiencing a stroke available twenty-four hours a day/seven days a week. There are currently nine hospitals within Los Angeles County that meet the standards (Attachment B).

Certification by the Joint Commission, or a determination by the EMS Agency that a hospital meets the Joint Commission requirements, as well as other standards as may be established by the EMS Agency, is required for approval as an ASC. The EMS Agency has also completed a related patient destination policy to govern ambulance transport to an ASC for certain patients who meet specified medical criteria. This patient destination policy has been approved by the EMS Commission.

CONTRACTING PROCESS

Not applicable. This will be a voluntary process, whereby the EMS Agency would identify the hospitals that meet the standards.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

The addition of ASCs to the EMS system will enhance current services available for 9-1-1 patients experiencing a stroke by ensuring that these patients are taken directly to a facility prepared to care for their specific needs. By transporting these patients to the appropriate hospital initially, the patient outcome is improved and costly and time consuming secondary transfers are eliminated.

Respectfully submitted,



John F. Schunhoff, Ph.D.
Interim Director

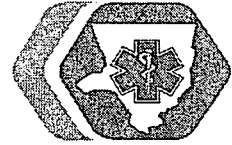
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Attachments (2)

c: Chief Executive Officer
Acting County Counsel
Executive Officer, Board of Supervisors



COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES



2009
**EMERGENCY MEDICAL SERVICES AGENCY
APPROVED STROKE CENTER STANDARDS**

PURPOSE:

Establish the minimum standards for Receiving Hospitals who wish to accept acute stroke patients from approved Advanced Life Support (ALS) providers within the Los Angeles County Emergency Medical Services System.

AUTHORITY/BASIS:

California Health and Safety Code, Sections 1797.220, 1798

California Code of Regulations, Title 22, Sections 100144, 100147, 100169

The Joint Commission, Disease Specific Care, Primary Stroke Centers.

DEFINITIONS:

Approved Stroke Center (ASC):

A 9-1-1 Receiving Hospital that has met the standards for Disease Specific Care for a Primary Stroke Center as certified by the Joint Commission and/or has met other standards established by the Los Angeles County Emergency Medical Services (EMS) Agency (if any), and has been approved as a Stroke Center by the EMS Agency.

POLICY:

I. General ASC Requirements

- A. ASCs shall be licensed as a general acute care hospital with a basic emergency department permit as defined by the State Department of Health Services and meet the standards of a Primary Stroke Center as defined by the Joint Commission, and other standards established by the EMS Agency (if any).

II. Application and Approval Processes

A. Application Process:

1. A hospital that wishes to become an ASC must submit a letter of interest no later than sixty (60) days prior to the desired date of designation as an ASC by the EMS Agency.
2. The hospital meets the standards of a Primary Stroke Center as defined by the Joint Commission, or proof of certification by the Joint

Commission, and documentation demonstrating that the facility meets ASC Joint Commission Standards and other standards established by the EMS Agency (if any).

3. The hospital's request must be signed by the hospital's Stroke Program Director and the Chief Executive Officer or Chief Operations Officer.

B. Approval Process:

1. The ASC will be approved after satisfactory review of one or more of the following at the discretion of the EMS Agency Medical Director or his/her designee: application, documentation demonstrating that the hospital meets all applicable standards (as requested), and a site survey.
2. Approvals will be mailed to each hospital and the information will be posted on the EMS Agency's website.
3. The ASC will be re-approved after a satisfactory EMS Agency review for up to a maximum three-year period at the discretion of the EMS Agency.
 - a. The EMS Agency may establish an approval period consistent with any current period for certification under the Joint Commission.
 - b. This Review may include a site survey by an independent review team.
 - c. The EMS Agency may also review the ASC status of a hospital at any time during a hospital's approval period.

The ASC Medical Director shall submit a written ninety (90) calendar day notice to the EMS Agency prior to the discontinuation of ASC services.

III. Notice of Joint Commission Certification Status Change

- A.. The ASC shall notify the EMS Agency in writing within three (3) business days of any change in the certification status of the ASC with the Joint Commission (e.g., denial of certification, preliminary denial of certification, conditional certification, revocation of certification, etc.). The ASC shall provide the EMS Agency with information as deemed necessary by the EMS Agency to review the approved status of an ASC.

**HOSPITALS WITHIN LOS ANGELES COUNTY CURRENTLY RECOGNIZED AS
PRIMARY STROKE CENTERS BY JOINT COMMISSION**

1. Cedars Sinai Medical Center
2. Glendale Adventist Medical Center
3. Long Beach Memorial Medical Center
4. Northridge Hospital Medical Center
5. Presbyterian Intercommunity Hospital
6. Providence Little Company of Mary Medical Center- San Pedro
7. Providence Saint Joseph Medical Center
8. Ronald Reagan UCLA Medical Center
9. Torrance Memorial Medical Center